

AC  
10/19

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MX	1001	9/8
O.I.P.E. CLASSIFIER	JZ		9/10
FORMALITY REVIEW	852		10-19-00
RESPONSE FORMALITY REVIEW			

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
Original	10/21/00
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here